

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Michael Snyder

Application No.: 10/821,745

Group No.: 1615

Filed: 04/09/2004

Examiner: Ghali, Isis AD

For: SUSTAINED RELEASE SURGICAL DEVICE AND METHOD OF MAKING AND USING
THE SAME

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

- Transmitted herewith is an amendment for this application.

STATUS

- Applicant is a small entity. A statement was already filed.

EXTENSION OF TERM

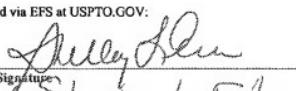
- The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(4)) for one month:

Fee: \$60.00

CERTIFICATION OF TRANSMISSION

I hereby certify that, on the date shown below, this correspondence is being filed via EFS at USPTO.GOV:

Date: 7-15-08




(type or print name of person certifying)

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(Col. 1) CLAIMS REMAINING AFTER AMENDMENT	(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	SMALL ENTITY		
TOTAL	1 - 20	= 0	x \$ 25.00	= \$	0.00
INDEP.	1 - 3	= 0	x \$ 105.00	= \$	0.00
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			+ \$	= \$	0.00
			TOTAL ADDIT. FEE	\$	0.00

No additional fee for claims is required.

FEE PAYMENT

5. Authorization is hereby made to charge the amount of \$60.00 to Deposit Account No. 50-1097.

Charge any additional fees required by this paper or credit any overpayment in the manner authorized above.

FEE DEFICIENCY

6. If an additional extension and/or fee is required, charge Account No. 50-1097.

If an additional fee for claims is required, charge Account No. 50-1097.

Date:

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